



# IDYLLWILD FESTIVALS INC



## Volunteer Application

Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_ (Optional)  Under 21 years old

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell phone: \_\_\_\_\_ Other Line: \_\_\_\_\_

Email: \_\_\_\_\_

Social Media: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Check the Events you're Interested in.



Sept. 24-26, 2021



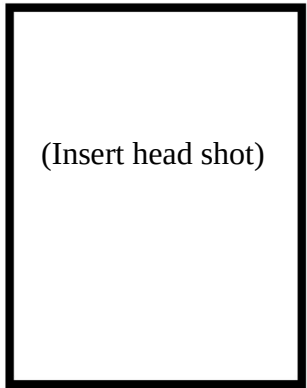
June 11-12, 2022



2022 Dates TBD



Dec. 18, 2021



## Position Desired

|  |                                      |  |  |
|--|--------------------------------------|--|--|
| <input type="checkbox"/> Actor - Entertainer | <input type="checkbox"/> Stage Crew  | <input type="checkbox"/> Technical Crew  | <input type="checkbox"/> Backstage           |
| <input type="checkbox"/> Make-up - Costumer  | <input type="checkbox"/> Security    | <input type="checkbox"/> Construction    | <input type="checkbox"/> Administration      |
| <input type="checkbox"/> Electrician         | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Health & Safety | <input type="checkbox"/> Whatever is needed! |

Other areas I might be of some help: \_\_\_\_\_

## Schedule Commitment

It is imperative that you clear your calendar for every shift you commit to work. While emergencies can occur, you become a valuable cog in our wheel once you join us. Any change in your commitment must be cleared with the volunteer coordinator at least 24 hours in advance. Do not over extend yourself or commit to time you are not sure of.

Please indicate any possible conflicts that will interfere with your commitment. Conflicts reported after casting may result in dismissal from the production. If you find you must make an adjustment to your schedule, please contact Marie Campbell-Regalado via email: [Volunteer@IdyllwildFestivals.com](mailto:Volunteer@IdyllwildFestivals.com)

## Volunteer Agreement

By signing this agreement, I agree to indemnify, hold free and harmless Idyllwild Festivals Inc, it's agents, employees, officers and directors from any and all costs arising from any demand for claim or assertion of liability, or any claim or action founded thereon, arising or alleged to have arisen out of my participation in this event. I agree to follow all rules and regulations established for this event. Absolutely no abuse of alcoholic beverages, weapons or illegal drugs will be allowed. I agree to the use of any and all images obtained at the event for the purposes of marketing without compensation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature of Guardian if volunteer is under 21 years old.)

Return completed form to: Idyllwild Festivals Inc PO Box 3533 Idyllwild, CA 92549 or complete on-line at: [IdyllwildFestivals.com](http://IdyllwildFestivals.com) or email to: [Volunteer@IdyllwildFestivals.com](mailto:Volunteer@IdyllwildFestivals.com)

Accepted by: \_\_\_\_\_ Date Joined: \_\_\_\_\_ Date Left: \_\_\_\_\_



### IdyllwildFestivals.com

501 (c) (3) Nonprofit Corporation

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